Minutes of the State Board of Health October 11, 2000

A meeting of the Washington State Board of Health (WSBOH) was held at the Yakima Area Arboretum and Botanical Garden, Yakima, Washington. The public meeting of the WSBOH was called to order by <u>Linda Lake, Chair</u>, at 9:50 a.m. that addressed the attendees with the following statement:

"This is a public meeting of the WSBOH held under provision of RCW 43.20. Notice of the meeting was provided in accordance with provisions of RCW 34.05, the Administrative Procedures Act. Those members having any conflict of interest on any item coming before the Board will report that conflict with respect to the particular subject under consideration. In case of challenge of any Board members by the public, the Board shall decide the status of the challenged members to participate before considering the substance of the matter."

The following Board members were present:

Linda Lake, Chair Ed Gray, MD Carl S. Osaki, RS, MPH Mary Selecky, Secretary, Department of Health Charles R. Chu, DPM Thomas H. Locke, MD, MPH The Honorable Margaret Pageler, JD Vickie Ybarra, RN, MPH

The following Board members were absent:

The Honorable Neva J. Corkrum, Vice Chair Joe Finkbonner, MHA

State Board of Health Staff present:

Don Sloma, Executive Director Heather Boe, Executive Assistant Doreen Garcia, Senior Health Policy Advisor Russell, Health Policy Advisor Beth Berendt, Senior Health Policy Advisor Janice Englehart, Senior Health Policy Advisor Desiree Robinson, Office Assistant Senior Donna Hal Dygert, Senior Assistant Attorney General

Guests and Other Participants:

- Nola Aichele, EPIC Headstart Health Program Manager
- Pat Brown, Department of Social & Health Services Region 2, Yakima Co. Children's Oral Health Coalition
- David Cundiff, MD, Department of Social & Health Services Medical Assistance Administration, Medical Director
- Alex Deccio, Washington State Senator
- Richardo Garcia, KDNA Radio
- Rhonda Hauff, Yakima Neighborhood Health
- Shannon Horne, Benton Franklin Health District
- Terri Jones, Yakima Health District
- Dennis J. Klukan, MSEPH, Yakima Health District Administrator
- Mark Koday, Washington State Oral Health Coalition
- Marty Lentsch, Yakima County Network
- Mike Maples, MD, CWFM
- Mary Jo Mengarelli, YNHS
- Anita Monoian
- Marcia Mueller, Department of Health
- Sandy Owen, Benton Franklin Health District
- Bruce Perkins, Benton Franklin Health District
- Roy Simms, MD, Washington Chapter American Academy of Pediatrics
- Gail Weaver, Yakima Valley Memorial Hospital
- Naomi Wenzel, Yakima Board of Health
- Margaret Wilson, Department of Social & Health Services Medical Assistance Administration

WELCOME

Mr. Dennis Klukan, Yakima Health District Administrator, welcomed the Board to Yakima County and the Arboretum. He described many of the accomplishments of the Yakima Health District, noting that it is the oldest combined health district in the state. Mr. Klukan wished the Board success in its efforts to address many of the State's pressing health problems.

APPROVAL OF AGENDA

<u>Carl Osaki, RS, MPH</u> proposed to add food safety to the list of items under the Environmental Health presentation.

Motion: To approve the October 11, 2000 agenda as amended.
 Motion/Second: <u>Ybarra/Selecky</u> the motion passed.

ADOPTION OF SEPTEMBER 13, 2000 MEETING MINUTES

Tom Locke, MD identified one spelling error -- Kris Locke.

Motion: To approve the September 13, 2000 minutes as amended.
 Motion/Second: <u>Locke/Chu</u> the motion passed.

BOARD PRIORITY HEALTH ISSUE: CHILDREN'S HEALTH AND WELL BEING

<u>Vickie Ybarra,RN, MPH, The Honorable Margaret Pageler, JD</u> and <u>Charles Chu, DPM</u> presented the report from the Subcommittee on Children's Health and Well Being as presented in the packet. <u>Ms. Ybarra</u> began their presentation by revisiting three of the Subcommittee's recommendations and proposed that the Board approve the successful completion of the following activities.

- Motion: The State Board of Health shall approve the completion of the following three recommendations and recognize the need for regular ongoing activities in these areas:
 - 1. Improved coordination between DOH and OSPI.
 - 2. Support of the Family Policy Council efforts to help families with young children. (<u>Ms. Ybarra</u> noted that the Board is not a member of this Council).
 - 3. Continued efforts to track and provide input on efforts to assure safe and healthy childcare and early education.

Motion/Second: <u>Children's Subcommittee</u> the motion passed.

<u>Dr. Ed Gray</u> initiated a general discussion about the role of the Board in advancing childcare health policy when he described a particular concern related to requirements in childcare facilities. <u>Secretary Selecky</u> commented that the Board's role includes talking with the relevant partners when an issue is brought to its attention. <u>The Honorable Margaret Pageler, JD</u>, added that the Board also serves the public by bringing interested parties before it.

Ms. Ybarra continued to discuss a comprehensive set of clinical preventive services for all children ages birth – ten as presented in the packet. She described the components of a comprehensive set of effective services, discussed the consultant's methodology and facilitated presentations from several interested parties. Invited panelists included Dave Cundiff, MD, Medical Director of the Medical Assistance Administration, DSHS, and Roy Simms, MD, President-Elect of the Washington Chapter of the American Academy of Pediatrics. Ms. Ybarra forwarded the following motion on behalf of the Subcommittee on Children's Health and Well Being, which she withdrew following Board discussion.

 Motion: The Washington State Board of Health approves the list of Clinical Preventive Services for All Children Birth to Ten.

Motion/Second: Children's Subcommittee the motion was withdrawn.

<u>Chair Lake</u> asked what other parties have developed a similar list of clinical preventive services. <u>Doreen Garcia</u> stated that no one party is coordinating this work and that the American Academy of Pediatrics (AAP), the Medical Assistance Administration (MAA), the Oral Health Coalition, and the Washington

Health Foundation, as well as many other organizations, are involved and contributed to the Subcommittee's work.

Ed Gray, MD expressed support of the work, but he noted the difficulty in financing prevention activities through the traditional insurance mechanism, especially due to scarce resources. Ms. Ybarra recognized the challenge and stated that this will need to be addressed in the subcommittee's future work. Thomas Locke, MD spoke to the needs to expand the orientation of practitioners away from strictly diagnosis and treatment and into the realm of prevention. Carl Osaki, RS, MSPH asked if the subcommittee found any conflict in recommendations for the list. Ms. Ybarra noted a few places of conflict in scope: mental health, oral health, and lead toxicity screening.

<u>David Cundiff, MD</u>, Department of Social & Health Services (DSHS), MAA, Medical Director presented a summary of the federal Early and Periodic Screening Diagnosis and Treatment (EPSDT) program. He stated that Medicaid/Healthy Options and fee for service systems are available; however, these benefits are not usually accessed unless kids have a strong advocate. Seldom do these kids have the necessary support to access the benefits. <u>Dr. Cundiff</u> then spoke to three overarching themes in his work. (1) Coverage does not equal delivery, especially in the area of preventive services; (2) It is very difficult to standardize delivery of services; and (3) The "Floor and Ceiling dilemma". As a federal program, there is no opportunity to lower the floor, but health plans are complaining that "Medicaid children are getting a 'cadillac' benefit." He expressed support for the Subcommittee's work for all children, but wants EPSDT intact for lowincome children.

Roy Simms, MD, AAP welcomed the Board to Yakima and stated that he wants to participate in the "battle" that lies before the medical community in providing preventive services and reimbursement for these services. He provided several recommendations on behalf of AAP as articulated in his October 11, 2000 statement to the Board. Ms. Garcia noted that many of his recommendations have already been incorporated into the Subcommittee's report to the Board.

Pat Brown, representing Dr. Koday, Yakima County and Washington State Oral Health Coalition, delivered comments on the need to incorporate oral health into general health care (see written testimony). Marsha Mueller, State Lead Surveillance Program, DOH stated that national recommendations for lead screening do not apply in Washington given extensive study by DOH and an advisory committee review. She stated that statewide, 0.9 % children had elevated blood lead levels; 3.8% had elevated blood lead levels in Central Washington. She stated that the advisory committee recommended not including blood lead level screening but did suggest additional study of nine counties in Central Washington, where blood lead levels are elevated. DOH supports the advisory committee recommendations. Mr. Osaki suggested that screening may provide necessary public health information and noted that high-risk populations exist throughout the state and not only in the nine Central Washington counties noted. He added that the treatment for lead is removal of source and not necessarily a medical intervention with the patient. He identified several additional exposure pathways: 1) home remodeling 2) occupational exposures and 3) home hobbyists. Ms. Garcia noted that there was some conflict about whether or not to include lead screening on the list, however, it will remain on the list until further evaluation. Dr. Gray questioned whether lead toxicity should be included if a treatment cannot be delivered.

Ms. Ybarra suggested that we withdraw the motion. The Subcommittee would like to bring the issue back to the Board in November to allow time for discussion among the interested parties.

PROGRESS REPORT FROM THE DEPARTMENT OF HEALTH, ENVIRONMENTAL HEALTH (EH) PROGRAMS

Carl Osaki, Janice Englehart and Bill White presented on several environmental health issues.

Group B Water Systems

Mr. White distributed a handout and gave a brief description of group B systems. He stated that in DOH's request for legislation, the Agency will be proposing diminished regulation of these smaller water systems.

Ms. Pageler asked if the system regulation was supported by fees. Mr. White stated that the fees covered 20 percent of the regulatory costs and the rest is federally funded through the EPA. Enforcement costs are

not regularly charged back to purveyors of water systems. <u>Secretary Selecky</u> stated that as the advisory committee looks at this issue the committee will consider whether Group B Systems should be unregulated and if regulated, what the fee schedule should be. She also noted that water utilities do pay utility taxes and the taxes are used to fund regulatory actions. <u>Mr. Osaki</u> concluded the discussion by suggesting that the Board needs to consider the policy question of whether they want to support a diminished regulatory function over group B water systems.

Rule Revision Process on Chapter 246-272 WAC, On-Site Sewage Systems

<u>Mr. White</u> distributed a handout and provided a summary of activities related to the rule revision. He announced that an advisory committee would be meeting over the next 18 months for this purpose. <u>Mr. Osaki</u> stated that the key policy issue will be whether the Board should delegate authority to DOH.

Proposed Delegation for Rule Revision to Chapter 246-260 WAC, Water Recreation Facilities

Mr. White distributed a handout, detailing issues relevant to the Water Recreation rule revision. He noted that much of the controversy around this rule surrounds DOH's divestment of its direct service role. He also stated that DOH very recently decided to remove the natural bathing beach model program piece from the rule because OFM decided not to fund this component. He added that new federal guidance is expected on this in the coming months.

Noting issues raised by the Local Environmental Health Directors regarding DOH's divestment of responsibility, Mr. Osaki proposed the following motion.

Motion: The Washington State Board of Health directs Board staff to sign the CR-101 with the intention of modifying Chapter 246-260 WAC, Water Recreation Facilities. At this time, however, the Board retains authority to modify the rule. Motion/Second: Osaki/Locke the motion passed unanimously.

<u>Chair Lake</u> asked if there would be problems with timing of the rule if the decision on delegation was delayed. <u>Mr. White</u> stated that it would not delay the initial steps of the process but the Board would need to quickly decide on whether or not to delegate. <u>Mr. Dygert</u> confirmed that the Board could initially sign a CR 101 and delegate the rule in the future. <u>Dr. Gray</u> reported that his district supports <u>Mr. Osaki's</u> concerns as they question the objectivity of DOH in this case.

Given OFM's decision not to fund DOH's proposal for Natural Bathing Beaches and DOH's subsequent decision to remove it from the proposed rule, <u>Mr. Osaki</u> spoke to the continued need to address the public health problems that exist in Natural Bathing Beaches. He cautioned that if the Board does not act directly, the issue may be raised in another venue (i.e., the Legislature). <u>Mr. Osaki</u> noted that the Local Environmental Health Directors and DOH are already beginning to work on a model program proposal. <u>Mr. Osaki</u> forwarded the following motion, which was later amended.

• Motion: The State Board of Health directs DOH and the local environmental health directors to develop a model program for natural bathing beaches by December 31, 2000.

Secretary Selecky voiced a concern that OFM has already rejected their proposal for funding, she also stated that DOH and Local Health jurisdictions are being asked to do a lot in 3 months.

Mr. Dygert also stated that while it is arguable that the Board could direct DOH to carry out this motion, he does not believe the Board can direct Environmental Health Directors to participate. Ms. Pageler stated that she was delighted that attention is being given to beaches and believes it is helpful to cities but is not clear how this relates to the Department of Ecology's work and water quality for salmon restoration efforts. Not knowing this information makes her reluctant to move quickly on this issue. Mr. White stated that he agreed that something needs to be done quickly or something quite different will be coming out of the Legislature. He expressed concern about the timing and resources necessary to develop the model program. Secretary Selecky suggested that the report might offer guidelines for future rather than an actual model program.

Dr. Gray offered the following amendment.

Motion: The State Board of Health recognizes the efforts of DOH and local health jurisdictions to develop a model program for natural bathing beaches. The Board requests a report from DOH in December 2000 on their progress towards developing a model program. Motion/Second: Gray/Locke the motion passed unanimously.

K-12 School Safety

Mr. White distributed a summary document and updated the Board on the School Safety Guide, jointly developed by DOH and OSPI.

Food Safety

Mr. White distributed a summary document and stated that DOH is working with the Governors office to develop a pilot project on food safety in schools.

TOBACCO AD CAMPAIGN

Given limited time, during the lunch break, <u>Secretary Selecky</u> showed the Board television and radio commercials targeted to children to help prevent them from starting to smoke. She announced that she will hold a press conference on tobacco cessation efforts today at 3 p.m. on site.

DEPARTMENT OF HEALTH (DOH) AND LEGISLATIVE UPDATE

<u>Secretary Selecky</u> focused on the DOH Proposals for 2001 Agency Request Legislation (see Tab 8). She also called attention to the Options for 2 % budget reductions from the State General Fund for the 2001-2003 biennium. Limited flu vaccine is going to be available this year and will not be available to everyone in every area of the state. Drinking water was briefly discussed given its impact on drinking water as well as its influence on the economy of WA.

SBOH STAFF ANNOUNCEMENTS

Mr. Sloma reviewed the FYI list attached to the Board's Final Agenda; a report entitled, "Regulatory Improvement: A Progress Report for the Department of Health and the State Board of Health," October 2000; and the "Proposed 2001 Board Meeting Schedule." Members briefly discussed locations such as the proposed location for the July 2001 meeting where the Subcommittee on Health Disparities will be presenting its findings.

ASSISTANT ATTORNEY GENERAL'S REPORT

Mr. Dygert provided an update on the Resist the List lawsuit. He discussed the Appeal from the United States District Court for the Ninth Circuit, argued and submitted September 15, 2000, "Resist the List, an Association, Plaintiff-Appellant v. Mary Selecky, as Secretary of the Washington State Board of Health, Defendant-Appellee. The Court affirmed the order granting abstention.

BOARD OF HEALTH WORK SESSION – CONTINUATION OF STRATEGIC PLANNING DISCUSSION

<u>Chair Lake</u> opened the discussion by referring to Tab 11 and briefly discussing the presentation made by Dr. Lawrence Wallack at the Joint Health Conference in Tacoma last week. She shared an overhead entitled, "Amplifying the Voice." She asked the Board to consider our priorities and meetings in the context of amplifying the Board's voice in Washington.

<u>Dr. Locke</u> stated that he thinks this is necessary and lacking. He suggested we create opportunities for people to be heard broadly and then to present these also through the State Health Report and the Board's annual report. <u>Dr. Gray</u> said he agreed with <u>Dr. Locke</u> and stated that paid advertising is necessary. <u>Mr.</u>

Osaki expressed some concern that policy has to be determined before it is given the forum, where so much of what the Board does is provide a forum to determine policy. Ms. Ybarra stated that this idea would compliment the work by the Children's Health and Well Being, but not be a replacement for it. Chair Lake stated that we would take on enormous responsibility for giving a forum to speak, but may not take a position. When we do other more detailed work and take a position, we could generate visibility. Dr. Gray stated that it would be better to bring issues to the attention of people before they become a crisis. Chair Lake stated that the Genetics Conference would be a worthwhile forum to use this method.

Mr. Osaki asked if the Board would identify the issues and how would we utilize a filter to determine if the issue is appropriate. Chair Lake suggested we try this on issues we are already working on. Dr. Locke said that the Board is more than its ten members—it includes all the connections each member has. Dr. Locke stated that providing the "public health voice" is actually "public health voices." An example raised was taking our work on Children's Health and Well Being to a location such as a public health department or provider or organization doing a great job in assuring clinical preventive services for children. Mr. Osaki suggested we go to places for our meetings where people need the help we have the power to provide. Dr. Chu agreed that we go to a place such as Mary Bridge Hospital in Tacoma to show the issues we are trying to work on.

<u>Chair Lake</u> asked if members of the Board routinely use email so that the Board members can engage in some interesting dialogue. <u>Mr. Dygert</u> pointed out the Open Meetings Act may interfere with this idea because you cannot have a quorum even via email. This will be looked into before it is tried.

IMPACT OF 2001 STATE PROCUREMENT DECISIONS ON MEDICAL CARE ACCESS

<u>Dr. Simms</u> addressed the Board in the morning on what this procurement has meant to his practice, to provider networks, and to public health concerns such as immunization rates.

<u>Dr. Cundiff</u> provided some historical perspective on the Healthy Options Program. He stated that while the most recent procurement process resulted in savings in addition to those assumed by the legislature, that many plans will not be participating in many counties and that some 140,000 recipients will either have to change plans, changes providers or both.

<u>John Whitbeck</u>, Center for Health Statistics, DOH presented an analytic framework for assessing access to care (presentation available from SBOH office). He asked <u>Vince Schuller</u> from the Office of Community and Rural Health at DOH to discuss indicators of access including provider availability and network adequacy modeling (presentation available from SBOH office).

<u>Dennis Klukan</u>, Yakima Health District Administrator, praised the state for wanting to provide all children with clinical health services in a stable medical home. However, he wondered if that goal can be realized at this time due to lack of access to health plans and providers. He stated that health departments couldn't provide a medical home with continuity of care even though they could be called upon to act in an emergency. People need access to a medical home and this should be for all of our citizens.

<u>Chair Lake</u> asked what clarity the Board can bring to the issue of access. She would like to reexamine this over the coming year to see the actual impact on health status.

<u>Mike Maples, MD</u> stated that the initial years of HO were very miserable for providers who had been seeing Medicaid beneficiaries to re-educate them from going to emergency rooms to having a stable medical home through HO. Now, with the loss of HO for many now, there will be serious problems for people now being thrown back to FFS. He expressed frustration with MAA because they blamed providers for the access problem and the providers saw there was a lack of provider capacity.

<u>Dr. Gray</u> stated that HO had important benefits, but it also distorted payments between adults and children. He suggested that we look at the whole Medicaid experience, not just HO.

Rhonda Hauff, Yakima Neighborhood Community Health Center suggested that the Board see documents from the Children's Alliance on how children fare in managed care. Ms. Hauff stated it would be helpful for the Board to shine a spotlight on this access issue and the need to protect HO.

<u>Dr. Gray</u> asked for macro management from MAA to the plans in regard to the notification of recipients about the changes

Board members discussed whether to send a message to others in state government. <u>Dr. Gray</u> expressed the need to state that it is a crisis situation for every practice with more than ten percent Medicaid business and more than 50 percent Medicare business. He stated the Board has a responsibility to be the bully pulpit on this. <u>Secretary Selecky</u> suggested that Board members attend the Rural Health Summit on October 26, 2000 at the Doubletree Hotel at SeaTac.

<u>Anita Monian</u> stated that about 22,000-23,000 people have been displaced due to all these changes in Yakima. <u>Mr. Sloma</u> said the Board could look at the impact of all this on people's health. <u>Chair Lake</u> would like the information about this offered by DOH. <u>Mr. Sloma</u> suggested getting this information for the November or December Board meeting so that it can be available for the Legislative Session.

PERIOD TO TAKE PUBLIC TESTIMONY ON ANY HEALTH ISSUE

None provided.

ADJOURNMENT

The meeting was adjourned at 5: 30 p.m.

WASHINGTON STATE BOARD OF HEALTH

Linda Lake, Chair